

# Dr Barretto & Partners, Thornton Heath Health Centre

## Quality Report

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This report describes our judgement of the quality of care at this service. It is based on a combination of what we found when we inspected, information from our ongoing monitoring of data about services and information given to us from the provider, patients, the public and other organisations.

### Ratings

Overall rating for this service

Good 

Are services safe?

Good 

# Summary of findings

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## Overall summary

### Letter from the Chief Inspector of General Practice

We carried out an announced comprehensive inspection of Dr Barretto & Partners, Thornton Heath Health Centre on 7 December 2016. The overall rating for the practice was good with requires improvement in Safe. Breaches of legal requirements were found relating to the Safe domain. The provider did not ensure that sufficient numbers of suitably qualified, competent, skilled and experienced persons were deployed: For example, not all staff had received appropriate training including fire safety, infection control and information governance. Also the provider did not have processes in place to ensure references were followed up.

After the comprehensive inspection, the practice submitted an action plan, outlining what they would do to meet the legal requirements in relation to the breach of regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The full comprehensive report can be found by selecting the 'all reports' link for Dr Barretto & Partners, Thornton Heath Health Centre on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

This inspection was a document-based review carried out on 8 September 2017 to confirm that the practice had carried out their plan to meet the legal requirements in

relation to the breaches in regulations that we identified in our previous inspection on 7 December 2016. This report covers our findings in relation to those requirements and also additional improvements made since our last inspection.

The practice is now rated as Good for providing Safe services, and overall the practice remains rated as Good

Our key findings were as follows:

- The practice had reviewed its policy on obtaining references for new staff. We saw a revised policy, a reference and a completed induction checklist, as one new member of staff had been recruited since the last inspection.
- The practice had reviewed its policy on training; we saw a copy.
- All staff had completed role appropriate training including fire safety training, infection control and information governance; we saw certificates for all staff members to demonstrate this.
- Comprehensive meeting minutes were taken, detailing mandatory training including basic life support, safeguarding, information governance, infection control and when staff should have this training completed by.

# Summary of findings

- An updated business plan had been drafted which had been reviewed in March 2017, which included all staff contact details: we saw a copy of this.
- The practice had discussed their mission statement with all staff; we saw an agenda and meeting minutes of this discussion.
- We saw copies of the updated complaints policy and complaints leaflet.
- An updated recruitment selection and interview policy had been had been reviewed in January 2017, we saw a copy of this.

**Professor Steve Field CBE FRCP FFPH FRCGP**  
Chief Inspector of General Practice

# Summary of findings

## The five questions we ask and what we found

We always ask the following five questions of services.

### **Are services safe?**

The practice is rated as good for providing safe services.

- The provider now ensured that sufficient numbers of suitably qualified, competent, skilled and experience persons were deployed.
- All staff had completed role appropriate training including fire safety training, infection control and information governance; we saw certificates for all staff members to demonstrate this.
- The practice had reviewed its policy on obtaining references for new staff. We saw a revised policy and references for one new member of staff who had been recruited since the last inspection.

**Good**



# Dr Barretto & Partners, Thornton Heath Health Centre

## Detailed findings

### Our inspection team

#### Our inspection team was led by:

Our inspection team was led by a CQC Lead Inspector.

## Background to Dr Barretto & Partners, Thornton Heath Health Centre

Dr Barretto & Partners, Thornton Heath Health Centre, shares its premises with community staff and Kings Dental Services. The practice list size is approximately 7000. The practice population is diverse, with a predominantly young working population. Eighty five percent of the patient population is less than 50 years old. Life expectancy for males in the practice is 78 years and for females 83 years. Both of these are in line with the Croydon Clinical Commissioning Group (CCG) and national averages for life expectancy.

The practice facilities include six consultation and treatment rooms and a patient waiting room. The consultation rooms are on the ground floor. The premises are wheelchair accessible and there are facilities for wheelchair users including an accessible toilet. There is a hearing loop for patients with hearing impairments. Baby changing facilities are available.

The staff team comprises two GP partners male and female and two salaried GPs (male and female) working a total of 26 sessions a week. Other staff include two female practice nurses, two female health care assistants, six receptionists/administration staff, a finance manager and a practice manager.

The practice is open between 8am and 6.30pm Monday to Friday. It offers extended hours from 9am to 11.30am on Saturday. When the practice is closed patients are directed (through a recorded message on the practice answer machine) to contact the local out of hours service.

The practice provides GP services to a nursing home and a mental health residential unit.

The practice is registered as a partnership with the Care Quality Commission (CQC) to provide the regulated activities of treatment of disease, disorder or injury; diagnostic and screening; family planning; maternity and midwifery services, and surgical procedures.

## Why we carried out this inspection

We undertook a comprehensive inspection of Dr Barretto & Partners, Thornton Heath Health Centre on 7 December 2016 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The practice was rated as good overall and requires improvement in the safe

# Detailed findings

key question. The full comprehensive report following the inspection on 7 December 2016 can be found by selecting the 'all reports' link for Dr Barretto & Partners, Thornton Heath Health Centre on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

During the comprehensive inspection carried out on 7 December 2016 we found that the practice did not ensure that sufficient numbers of suitably qualified, competent, skilled and experienced persons were deployed. This was because not all staff had received appropriate training including fire safety, infection control and information governance. The provider did not have processes in place to ensure references were followed up.

This inspection was carried-out to check that improvements to meet legal requirements planned by the practice after our comprehensive inspection on 7 December 2016 had been made.

We undertook a follow up desk-based focused inspection of Dr Barretto & Partners, Thornton

Heath Health Centre on 8 September 2017. We inspected the practice against one of the five questions we ask about

services: is the service safe. This inspection was carried out to review in detail the actions taken by the practice to improve the quality of care and to confirm that the practice was now meeting legal requirements.

## How we carried out this inspection

We carried out a desk-based focused inspection of Dr Barretto & Partners, Thornton Heath Health Centre on 8 September 2017. This involved reviewing evidence:

- Looked at policies procedures and action plans.
- Reviewed staff certificates.
- Looked at agendas and minutes.
- Reviewed references obtained.
- Reviewed updated complaints leaflets.

Looked at an updated business plan.

# Are services safe?

## Our findings

### Our findings

At our previous inspection on 7 December 2016, we rated the practice as requires improvement for providing safe services as the practice did not ensure that sufficient numbers of suitably qualified, competent, skilled and experienced persons were deployed: For example, not all staff had received appropriate training including fire safety, infection control and information governance. Also the provider did not have processes in place to ensure references were followed up.

These arrangements had improved when we undertook a follow up inspection on 8 September 2017. The practice is now rated as good for providing safe services.

### Overview of safety systems and process

During the initial inspection on 7 December 2016 not all staff had received appropriate training including fire safety, infection control and information governance. Also the practice did not have processes in place ensure references were followed up.

During the document based follow-up inspection we saw certificates for all members of staff demonstrating they had all completed fire safety, infection control and information governance.

Appropriate recruitment checks were undertaken prior to employment. The practice provided us with an updated policy regarding references. The practice was able to demonstrate they implemented their policy as one staff member had been recruited since the 7 December 2016 inspection.